

**OFFICE OF ECONOMIC OPPORTUNITY
VISTA PROJECT PROPOSAL**

(1, 2) Approval expires December 31, 1966
(FOR VISTA OFFICE USE ONLY) (3-10)
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SECTION I SPONSOR INFORMATION											
1a. NAME OF SPONSOR OR OTHER PARTICIPATING AGENCY 12-67				1b. PROPOSAL MADE BY 63		2. NO. AND STREET		Card No. 42		12-35	
Community Relations Commission				<input checked="" type="checkbox"/> Sponsor <input type="checkbox"/> Other participating agency		68 Mitchell St., S. W. Room 1203 City Hall					
3. CITY OR TOWN 36-43		4. COUNTY 49-51		5. STATE		6. ZIP CODE 52-56		7. CONGRESSIONAL DIST. 57, 53		8. TELEPHONE (Area code and number)	
Atlanta		Fulton		Ga.		30303		4th & 5th		404 522-4463 Ext. 433,434	

9. THIS SECTION TO BE COMPLETED ONLY BY PARTICIPATING OR COOPERATING AGENCIES

A. NAME OF SPONSOR WITH WHICH THE AGENCY IS PARTICIPATING		B. RELATIONSHIP TO SPONSOR AND EXTENT OF PARTICIPATION OR COOPERATION (Check) 59		
		<input type="checkbox"/> 1 Co-sponsor jointly and equally responsible for conduct of project and supervision and support of volunteers <input type="checkbox"/> 2 Will provide general supervision of the project <input type="checkbox"/> 3 Will undertake conduct of project and supervision and support of volunteers on default of primary sponsor		

10. OFFICIAL REPRESENTING THE SPONSOR OR PARTICIPATING AGENCY Card No. 43 12-36		11. NUMBER AND STREET (If different from Item 2)	
a. Name:			
b. Title:			
12. CITY, TOWN, OR COUNTY		13. STATE	
14. ZIP CODE		15. TELEPHONE (Area code and number)	

16. TYPE OF PROPOSAL (Check)		37 17. TYPE OF PROJECT (Check)		38-39 18. NO. OF VOLUNTEERS REQUESTED 40-42	
<input checked="" type="checkbox"/> 1 Initial proposal <input type="checkbox"/> 2 Amendment or extension of previously approved project <input type="checkbox"/> 3 Other (Specify)		<input type="checkbox"/> 1 Rural community development <input type="checkbox"/> 2 Indians—on reservation <input type="checkbox"/> 3 Indians—off reservation <input type="checkbox"/> 4 Migrants <input type="checkbox"/> 5 Job corps—conservation <input type="checkbox"/> 6 Rural—Appalachian <input type="checkbox"/> 7 Other rural poor		<input type="checkbox"/> 30 Trust Territory <input checked="" type="checkbox"/> 31 Urban community <input type="checkbox"/> 32 Mentally ill <input type="checkbox"/> 33 Job Corps—urban <input type="checkbox"/> 34 Justice <input type="checkbox"/> 35 Mentally retarded <input type="checkbox"/> 36 Other urban poor	
				2	

19. SPONSOR ORGANIZATION		A. PUBLIC AGENCY (Check)		B. NON-GOVT. NON NON-PROFIT ORG. (Check) COMPLETE ITEMS C AND D. 43		C. TAX STATUS 44		D. DATE ORGANIZATION BEGAN OPERATIONS (Month—Year) 45-47	
<input checked="" type="checkbox"/> 1 City <input type="checkbox"/> 2 County <input type="checkbox"/> 3 State <input type="checkbox"/> 4 Federal		<input type="checkbox"/> 5 Tribal Council <input type="checkbox"/> Other (Specify)		<input type="checkbox"/> 6 Incorporated <input type="checkbox"/> 7 Unincorporated		<input type="checkbox"/> 1 Tax exempt—date of IRS ruling <input type="checkbox"/> 2 Non Tax Exempt <input type="checkbox"/> 3 Non Tax Exempt—IRS ruling applied for		Jan. 1967	

20. PRINCIPAL PROGRAM OF SPONSOR		B. BRIEFLY DESCRIBE THE PURPOSE AND FUNCTION OF THE SPONSOR AND ITS PAST AND PRESENT ACTIVITIES TO COMBAT PROBLEMS OF POVERTY.	
<input type="checkbox"/> 1 Community development <input type="checkbox"/> 2 Job training <input type="checkbox"/> 3 Self help programs <input type="checkbox"/> 4 Education <input type="checkbox"/> 5 Health programs <input type="checkbox"/> 6 Mental health <input type="checkbox"/> 7 Child care <input type="checkbox"/> 8 Recreation		<input type="checkbox"/> 9 Cooperatives 43-49 <input type="checkbox"/> 10 Citizenship OTHER PROGRAM SUPPORT <input type="checkbox"/> 11 NYC <input type="checkbox"/> 12 Job Corps <input type="checkbox"/> 13 Manpower, dev. and training <input checked="" type="checkbox"/> 14 Other (Specify)	
Community Relations		Improve community relations; insure opportunity for all to develop fullest potential; promote mutual respect, tolerance, etc.	

ACCEPTANCE OF CONDITIONS

This proposal with all forms, exhibits and attachments hereto, is submitted for consideration as a VISTA project. It is understood and agreed by the undersigned authorized representative of the sponsor, that a project developed as a result of this proposal is subject to the conditions set forth in the VISTA manual, "Guidelines for Sponsors."

1. TYPED NAME AND TITLE OF SPONSOR		2. SIGNATURE		3. DATE	